	FORM 3 AMENDED REPORT								
APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER NBU 921-25N3AS			
2. TYPE OF WORK DRILL NEW WELL REENTER P&A WELL DEEPEN WELL					3. FIELD OR WILDCAT NATURAL BUTTES				
4. TYPE OF WELL Gas Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME NATURAL BUTTES			
6. NAME OF OPERATOR KERR-MCGEE OIL & GAS ONSHORE, L.P.						7. OPERATOR PHONE 720 929-6007			
8. ADDRESS OF OPERATOR P.O. Box 173779, Denver, CO, 80217						9. OPERATOR E-MAIL Kathy. SchneebeckDulnoan@anadarko.com			
10. MINERAL LEASE NUMBER 11. MINERAL OWNERSHIP				12. SURFACE OWNERSHIP					
(FEDERAL, INDIAN, OR STATE) UO 1194 ST	FEDERAL INDIAN STATE FEE				FEDERAL INDIAN STATE FEE				
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')			
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME		18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS				19. SLANT			
(if box 12 = 'INDIAN')	YES (Submit Commingling Application			ion)	NO 🔵	VERTICAL DIRECTIONAL HORIZONTAL			
20. LOCATION OF WELL	FC	OOTAGES	QTR-QTR	9	SECTION	TOWNSHIP	RANGE	MERIDIAN	
LOCATION AT SURFACE 1158 FS		SL 2575 FWL	SESW		25	9.0 S	21.0 E	S	
Top of Uppermost Producing Zone 508 FS		6L 1729 FWL	SESW		25	9.0 S	21.0 E	S	
At Total Depth	508 FS	SL 1729 FWL	SESW		25	9.0 S	21.0 E	S	
21. COUNTY UINTAH	22. DISTANCE TO NEAREST LEASE LINE (Feet) 508				23. NUMBER OF ACRES IN DRILLING UNIT				
	25. DISTANCE TO NEAREST WELL IN SAME POOL (Applied For Drilling or Completed) 335			POOL	26. PROPOSED DEPTH MD: 9730 TVD: 9563				
27. ELEVATION - GROUND LEVEL		28. BOND NUMBER				29. SOURCE OF DRILLING WATER /			
4956		22013542				WATER RIGHTS APPROVAL NUMBER IF APPLICABLE Permit #43-8496			
		Α٦	ITACHMENTS						
VERIFY THE FOLLOWING	ARE ATTACH	IED IN ACCORDAN	CE WITH THE U	ТАН (OIL AND (GAS CONSERVAT	ION GENERAL RU	JLES	
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN					
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)				TOPOGRAPHICAL MAP					
NAME Danielle Piernot T		TITLE Regulatory Analyst			PHONE 72	PHONE 720 929-6156			
SIGNATURE DATE		DATE 08/13/2010	TE 08/13/2010 EMAIL g			nbregulatory@anadarko.com			
API NUMBER ASSIGNED APPROVAL 43047512630000				Bacqill					
				Permit Manager					

